



State Medical Assistance and Services Advisory Council

225 E. 16th Street
Denver, Colorado 80203

June 26, 2013
6:00pm – 7:45pm
MINUTES

ATTENDING:

Council Present: Andrew Davis, Mark Thrun, Nancy Stokes, Dennis Lewis,
Blaine Olsen, Theresa McCoy, Peter McNally, Victoria Vowel

Council Absent: Robert Bremer, Rebecca Lefebvre, J. Scott Ellis, Louise Vail

HCPF Representatives: Sarah Roberts

CDPHE Representative: Steve Holloway

HCPF Presenters: Elizabeth Baskett, Antoinette Taranto

Guests: Gerrie Frohne

Meeting called to order at 6:00 p.m.

May minutes were approved

Eligibility Overview and Affordable Care Act (ACA)

Antoinette Taranto provided an overview of the eligibility process with the advent of the ACA. There are now over 600 partners that have joined with HCPF to accept Medicaid applications. The ACA has introduced a new income and household counting methodology. Applications will be processed over the phone or online through the Exchange (health insurance marketplace). The income limit for AwDC has been increased from 10% to 133% and for parents from 100% to 133%. The ACA has also set about improving technology, calling for the rebuilding of systems. We will see in the future, real time determinations of applications and the ability to verify information through electronic data sources which will greatly speed up the review process.

Health Homes

Elizabeth Baskett presented to the council on the state's option to provide Health Homes for enrollees with chronic conditions. HCPF has contracted with a consultant who has worked with other states that are implementing this program. The consultant is doing a feasibility analysis and operational plan to present to HCPF. Should HCPF decide to go forward with this project it will include a plan to have a very robust stakeholder process. The idea is to layer the program on an existing home model. The focus is on chronic conditions. The prerequisite is for: (1) two or more chronic conditions, (2) one condition and the risk of developing another or (3) at least one serious and persistent mental health condition. States may also add other chronic conditions and seek approval for them from the Centers for Medicare and Medicaid (CMS). The state will designate who can provide health home services within the parameters set by CMS. The state can receive a 90% enhanced federal match reimbursement rate for 8 quarters and can receive technical assistance provided by CMS.

Consumer Directed Attendant Support Services (CDASS)

The CDASS program is growing and working with clients and advocates and having monthly group meetings. CDASS is looking at expanding into other waivers such as the traumatic brain injury waiver in January 2014. They are currently working to make sure funding, budgeting and operating issues are all aligned. Community First Choice is a state plan service which will be an option under the ACA and will allow for more person centered self direction with all services. It was agreed that Candie Dalton would speak at the next State Medical Assistance and Services Advisory Council meeting to address (1) concerns about the quality and oversight and external checks and balances of providers and caretakers; (2) concern that it will now take longer to have the CDASS option available to those in the developmentally disabled community.

Round Robin

Davis: Two new programs/roles of pharmacists:

- (1) Pharmacists are responsible for medication reconciliation which benefits providers and patients and the end result is a medication list on after visit summary that is more up to date and more accurate.
- (2) Multi-disciplinary group of pharmacists and nurses that manage refill renewal requests which previously had been done by nurses and are now working together.

Drug shortages continue. Creative alternatives and strategies are being used to deal with the problem. Vaccines shortages also occur.

Olsen: Clinic is hiring case manager to be paid for through the RCCO. RCCO has recognized that some of the managed care can be handled better through the clinics as case managers are more effective if in the clinic.

Orienting interns to using electronic health records while visiting clients.

Nomination Results

Rebecca Lefebvre is the new Chair and Andrew Davis is the co-chair.

The meeting adjourned.